DELINEATION OF CLINICAL PRIVILEGES - AEROSPACE MEDICINE (For use of this form, see AR 40-68; the proponent agency is OTSG.) 2. RANK/GRADE | 3. FACILITY 1. NAME OF PROVIDER (Last, First, MI) INSTRUCTIONS: PROVIDER: Enter the appropriate provider code in the column marked "REQUESTED". Each category and/or individual privilege listed must be coded. For procedures listed, line through and initial any criteria/applications that do not apply. Your signature is required at the end of Section I. Once approved, any revisions or corrections to this list of privileges will require you to submit a new DA Form 5440. SUPERVISOR: Review each category and/or individual privilege coded by the provider and enter the appropriate approval code in the column marked "APPROVED". This serves as your recommendation to the commander who is the approval authority. Your overall recommendation and signature are required in Section II of this form. GENERAL: Aerospace Medicine practitioners will demonstrate skills in interviewing, examination, assessment, and management of patients with general medical, minor surgical, and psychiatric health problems. Full privileges may include admission privileges to the general medical service. Seriously ill patients will be managed in consultation with or direct referral to appropriate specialty physicians. Aerospace Medicine clinical privileges are divided into four major categories. The category of privileges requested should be specified. APPROVAL CODES PROVIDER CODES 1 - Approved as fully competent 1 - Fully competent to perform 2 - Modification required (Justification noted) 2 - Modification requested (Justification attached) 3 - Supervision required 3 - Supervision requested 4 - Not approved, insufficient expertise 4 - Not requested due to lack of expertise 5 - Not approved, insufficient facility support 5 - Not requested due to lack of facility support SECTION I - CLINICAL PRIVILEGES Category I. Aviation Medicine. Evaluation and follow-up of medical conditions affecting flying status of Army aircrew members. Preparation of prescribed medical reports and recommendations to the appropriate aviation unit commander and to the US Army Aeromedical Center. Responsible for conducting basic aviation preventive medicine and occupational medicine programs. Requires successful completion of the US Army basic flight surgeon course but does not require residency training in Aerospace Medicine. Requested Approved Category I clinical privileges a. Perform flying duty medical examinations IAW AR 40-501 b. Serve as medical member on Flying Evaluation Boards c. Serve as medical member on Mishap Investigation Boards d. Prepare and submit Aeromedical Summaries e. Perform medical in-flight evaluations of individual aviators f. Conduct occupational medicine surveys of flight line activities g. Conduct medical portion of aviation hearing conservation program h. Determine individual patient suitability for aeromedical evacuation i. Review all medical care provided to personnel on flight status j. Participate regularly as medical observer in flight operations k. Conduct aeromedical training of aircrew members as described in AR 95-1 I. If certified by the FAA, perform First and Second Class Federal Aviation Administration (FAA) flight physicals Category II. General Medical Care. Includes Category I. Acute and chronic care of uncomplicated illnesses or problems which have low risk to the patient. Inpatient care of uncomplicated conditions may be appropriate for selected practitioners. Residency training beyond PGY-1 is not required, but reasonable experience in the care of patients with these problems or in the performance of these procedures is required. Requested | Approved Requested Approved (5) Naso- or orogastric lavage and/or a. Medical Procedures drainage (1) ECG performance and initial (6) Management of uncomplicated interpretation conditions of the: (2) Basic initial radiological interpretation (a) Respiratory tract (Skull, spine, chest, abdomen, IVP and (b) Gastrointestinal tract extremity) (c) Genitourinary tract, including PID

(3) Arterial or venous puncture

(4) KOH preps: Wright's and Gram's stains

(d) Skin and mucous membranes

lequested	(continued) Approved	Requested	Approved	
equesteu	(e) Bones and joints	Hoquestea	Арріочеа	(c) Hip
	(f) Inpatient management of the above	3		(13) Emergency myringotomy
	conditions			(14) Repair of cutaneous lacerations
	(7) Arthrocentesis, diagnostic			multiple layers not involving tendons
	(8) Noncontact tonometry			or nerves
	(9) Slit lamp exam			(15) Vasectomy
	(10) Flexible sigmoidoscopy			
	(11) Lumbar puncture, diagnostic			
				c. Pediatrics (excluding neonates)
				(1) Manage uncomplicated infections of:
	b. Surgical Procedures			(a) Respiratory tract
	(1) Local infiltration anesthesia			(b) Gastrointestinal tract
	(a) Cutaneous			(c) Genitourinary
	(b) Digital block			(d) Skin and mucous membranes
	(2) Repair of cutaneous lacerations, one			(2) Manage allergic disorders
	layer			(a) Uncomplicated asthma
	(3) Splinting/immobilizing of simple			(b) Urticaria
	fractures and sprains (4) Incision and drainage of localized			(c) Allergic reaction to drugs
	cutaneous and subcutaneous			(d) Allergic rhinitis/sinusitis
	abscesses or thrombosed hemorrhoids (5) Excision of cutaneous and	PARABILLE:		(3) Provide routine well-child care
	subcutaneous cysts			(a) Examination
	(6) Excision biopsy of skin or			(b) Nutrition and growth assessment
	subcutaneous tumors			(c) Developmental landmarks
	(7) Removal of foreign body by speculum forceps, or superficial incision including corneal foreign bodies			assessment
	(8) Trephination or removal of nail			(4) Perform the following procedures:
	(9) Injection of bursa or joint			(a) Bladder catheterization
	(10) Normal antepartum and postpartum			(b) Suprapubic bladder aspiration
	care			(c) IV therapy for fluid and electrolyt disturbances
	(11) Emergency venous access			(d) Lumbar puncture, diagnostic
	(a) Central venous line placement			(e) Needle aspiration for cultures
	(b) Cut down, venous			(f) Assist uncomplicated delivery
	(c) Intraosseous infusion			(5) Perform routine immunizations
	(12) Closed reduction of fractures/ dislocations			(5) Ferrorii Foddine mindinzatione
	(a) Digits			
	(b) Shoulder			
Advance the prac cognized	I. Aerospace Medicine. Includes Categories I and II. ed care and follow-up of medical conditions affecting flyin tice of aerospace medicine. Requires successful completicertifying board examination in Aerospace Medicine.	on of residenc	y training in	Aerospace Medicine or eligibility to take a
equested	Approved	Requested	Approved	(4) Non-healing wounds
	a. Medical/Surgical Procedures			(5) Symptomatic carbon monoxide
	(1) Conduct aeromedical treadmill tests			poisoning
	(2) Initial interpretation of aeromedical treadmill tests			(6) Suspected gas gangrene
	(3) Interpret audiologic testing			c. Medical Evacuation (MEDEVAC)
	b. Hyperbaric MedicineInitial consultation			(1) Consultation for patients/passengers
	for: (1) Suspected decompression sickness			and their physicians regarding the stresses of aerospace travel and
	(2) Suspected air or gas embolism			associated aeromedical issues
	121 Suspected all of gas embolism			(2) Consultation on optimal transportation

Category III.	(continue	d)
Requested	Approved	
		(3) Oversight and quality assurance for overall MEDEVAC services
		(4) Quality assurance for MAST-air ambulance medical operations
		d. Hypobaric Medicine
		(1) Low atmospheric tension injuries (e.g., barotrauma, bends)
		(2) Evaluate students for medical conditions precluding low atmospheric training
		(3) Supervise operation of a hypobaric (altitude) chamber
		e. Mishap Investigation/Safety Program
		(1) Consultation to mishap boards to assess crash kinematics, crash survivability, and human factors
		(2) Review local mishap and disaster response plans
		(3) Quality assurance of crash site medical operations
		(4) Medical liaison with AFIP and USASC
		(5) Participation in aviation unit safety programs
Provision	of Occupat	ental. Includes Categories I, II, and III. tional Medicine and general Preventive Medicine services, usually in the absence of such specialists. Requires of residency training in Aerospace Medicine or certification by a recognized Board of Preventive Medicine.
Requested	Approved	
	authorizing.	a. Occupational Medicine
		 Identify occupational and environmental hazards, illnesses and injuries in defined populations; assess and respond to identified risks
		(2) Assess individual risk for occupational/environmental disorders using an occupational and environmental history
		(3) Assist with occupational health promotion and disease/injury prevention programs
		(4) Consultation for hazardous materials handling
in alleran		b. Preventive Medicine
		(1) Provide oversight for travel medical services
		(2) Consultation for medical planning for deploying personnel
		(3) Design and/or conduct an outbreak and/or cluster investigation
		(4) Identify ethical, social and cultural issues relating to policies, risks, research and interventions in public and preventive medicine contexts.
		(5) Develop, implement and refine screening programs for groups to identify risks for disease or injury and to promote wellness
		(6) Implement community-based interventions to modify or eliminate identified risks for disease or injury and to promote wellness
		(7) Design and implement clinical preventive services for individuals
COMMENTS		

COMMENTS (Continued)			
	SIGNATURE OF PROVID	DER	DATE (YYYYMMDD)
SECTION II - SU	JPERVISOR'S RECOMMEN	IDATION	
Approval as requested Approval with Modification	ations (Specify below)	Disapproval (Specify below)	
COMMENTS			
DEPARTMENT/SERVICE CHIEF (Typed name and title)	SIGNATURE		DATE (YYYYMMDD)
SECTION III - CREDEN	ITIALS COMMITTEE RECO	MMENDATION	
Approval as requested Approval with Modifica	ations (Specify below)	Disapproval (Specify below)	
COMMENTS			
CREDENTIALS COMMITTEE CHAIRPERSON (Name and rank)	SIGNATURE		DATE (YYYYMMDD)

EVALUATION OF CLINICAL PRIVILEGES - AEROSPACE MEDICINE (For use of this form, see AR 40-68; the proponent agency is OTSG.)						
NAME OF PROVIDER (Last, First, MI)	2. RANK/GRADE	3. PERIOD OF EVA	ALUATION (YYYYMMDD)			
4. DEPARTMENT/SERVICE	5. FACILITY (Name	and Address: City/State/Z	(IP Code)			

INSTRUCTIONS: Evaluation of clinical privileges is based on the provider's demonstrated patient management abilities appropriate to this discipline, and his/her competence to perform the various technical skills and procedures indicated below. All privileges applicable to this provider will be evaluated. For procedures listed, line through and initial any criteria/applications that do not apply. The privilege approval code (see corresponding DA Form 5440) will be entered in the left column titled "CODE" for each category or individual privilege. Those with an approval code of "4" or "5" will be marked "Not Applicable". Any rating that is "Unacceptable" must be explained in SECTION II - "COMMENTS". Comments on this evaluation must be taken into consideration as part of the provider's reappraisal/renewal of clinical privileges and appointment/reappointment to the medical staff.

CATEGORY I PRIVILEGES	ACCEPTABLE	UN- ACCEPTABLE	NOT APPLICABLE
Category I clinical privileges	ACCELLADEE	ACCELLABEE	AFFEICABL
a. Perform flying duty medical examinations IAW AR 40-501			
b. Serve as medical member on Flying Evaluation Boards			
c. Serve as medical member on Mishap Investigation Boards			
d. Prepare and submit Aeromedical Summaries			
e. Perform medical in-flight evaluations of individual aviators			
f. Conduct occupational medicine surveys of flight line activities			
g. Conduct medical portion of aviation hearing conservation program			
h. Determine individual patient suitability for aeromedical evacuation			
i. Review all medical care provided to personnel on flight status			
j. Participate regularly as medical observer in flight operations			
k. Conduct aeromedical training of aircrew members as described in AR 95-1			
I. If certified by the FAA, perform First and Second Class Federal Aviation Administration (FAA) flight physicals			
CATEGORY II PRIVILEGES a. Medical Procedures			
(1) FCG performance and initial interpretation			
ECG performance and initial interpretation Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP)			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity)			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage (6) Management of uncomplicated conditions of the:			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage (6) Management of uncomplicated conditions of the: (a) Respiratory tract			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage (6) Management of uncomplicated conditions of the: (a) Respiratory tract (b) Gastrointestinal tract			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage (6) Management of uncomplicated conditions of the: (a) Respiratory tract (b) Gastrointestinal tract (c) Genitourinary tract, including PID			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage (6) Management of uncomplicated conditions of the: (a) Respiratory tract (b) Gastrointestinal tract (c) Genitourinary tract, including PID (d) Skin and mucous membranes			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage (6) Management of uncomplicated conditions of the: (a) Respiratory tract (b) Gastrointestinal tract (c) Genitourinary tract, including PID (d) Skin and mucous membranes (e) Bones and joints			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage (6) Management of uncomplicated conditions of the: (a) Respiratory tract (b) Gastrointestinal tract (c) Genitourinary tract, including PID (d) Skin and mucous membranes (e) Bones and joints (f) Inpatient management of the above conditions			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage (6) Management of uncomplicated conditions of the: (a) Respiratory tract (b) Gastrointestinal tract (c) Genitourinary tract, including PID (d) Skin and mucous membranes (e) Bones and joints (f) Inpatient management of the above conditions (7) Arthrocentesis, diagnostic			
(2) Basic initial radiological interpretation (Skull, spine, chest, abdomen, IVP and extremity) (3) Arterial or venous puncture (4) KOH preps: Wright's and Gram's stains (5) Naso- or orogastric lavage and/or drainage (6) Management of uncomplicated conditions of the: (a) Respiratory tract (b) Gastrointestinal tract (c) Genitourinary tract, including PID (d) Skin and mucous membranes (e) Bones and joints (f) Inpatient management of the above conditions			

CODE	CATEGORY II PRIVILEGES (Continued)	ACCEPTABLE	UN- ACCEPTABLE	NOT APPLICABLE
	(11) Lumbar puncture, diagnostic	ACCELLABEE	ACCEPTABLE	AFFLICABLE
	The second secon			
V. Tall (C.S.)	b. Surgical Procedures	VALUE SEEDER VALUE		nec and one an
	(1) Local infiltration anesthesia		MAINTEN BOOK SKE	
	(a) Cutaneous			
	(b) Digital block	_		
	(2) Repair of cutaneous lacerations, one layer			
	(3) Splinting/immobilizing of simple fractures and sprains			
	(4) Incision and drainage of localized cutaneous and subcutaneous abscesses or thrombosed hemorrhoids			
	(5) Excision of cutaneous and subcutaneous cysts			
	(6) Excision biopsy of skin or subcutaneous tumors			
	(7) Removal of foreign body by speculum, forceps, or superficial incision including corneal foreign bodies			
	(8) Trephination or removal of nail			
	(9) Injection of bursa or joint			
	(10) Normal antepartum and postpartum care			
	(11) Emergency venous access			
	(a) Central venous line placement			
	(b) Cut down, venous			
	(c) Intraosseous infusion			
	(12) Closed reduction of fractures/dislocations		ALIGN SERVICE	
	(a) Digits			
	(b) Shoulder			
	(c) Hip			
	(13) Emergency myringotomy (barotrauma)			
	(14) Repair of cutaneous lacerationsmultiple layers not involving tendons or			
	nerves			
	(15) Vasectomy			
	c. Pediatrics (excluding neonates)	K-15-1		
	(1) Manage uncomplicated infections of:			
	(a) Respiratory tract			
	(b) Gastrointestinal tract			
	(c) Genitourinary			
	(d) Skin and mucous membranes			
	(2) Manage allergic disorders			
	(a) Uncomplicated asthma			
	(b) Urticaria			
	(c) Allergic reaction to drugs			
	(d) Allergic rhinitis/sinusitis			
	(3) Provide routine well-child care			THE REAL PROPERTY.
	(a) Examination			:4
	(b) Nutrition and growth assessment			
	(c) Developmental landmarks assessment			
	(4) Perform the following procedures:	\$1000 X 6 1 2		
	(a) Bladder catheterization			
	(b) Suprapubic bladder aspiration			
	(c) IV therapy for fluid and electrolyte disturbances			
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CODE	CATEGORY II PRIVILEGES (Continued)		UN-	NOT
	(d) Lumbar puncture, diagnostic	ACCEPTABLE	ACCEPTABLE	APPLICABLE
	(e) Needle aspiration for cultures			
	(f) Assist uncomplicated delivery			
	(5) Perform routine immunizations			
			12	
			Santa Cadana	NAME OF STREET
	CATEGORY III PRIVILEGES			
THE STREET	a. Medical/Surgical Procedures (1) Conduct aeromedical treadmill tests		190 (50)	
	(2) Initial interpretation of aeromedical treadmill tests			
	(3) Interpret audiologic testing	EURI PARESCIPSI		7 TO 101 101 101 101 101 101 101 101 101 10
	b. Hyperbaric MedicineInitial consultation for:	MEDITO VANIAN		
	(1) Suspected decompression sickness			
	(2) Suspected air or gas embolism			
	(3) Acute traumatic ischemia			
	(4) Non-healing wounds			
	(5) Symptomatic carbon monoxide poisoning			
	(6) Suspected gas gangrene			
25年日本日	c. Medical Evacuation (MEDEVAC)		Russes III	
	(1) Consultation for patients/passengers and their physicians regarding the stresses of aerospace travel and associated aeromedical issues			
	(2) Consultation on optimal transportation for complicated patients			
	(3) Oversight and quality assurance for overall MEDEVAC services			
	(4) Quality assurance for MAST-air ambulance medical operations			
	d. Hypobaric Medicine			A PROPERTY OF
	(1) Low atmospheric tension injuries (e.g., barotrauma, bends)			
	(2) Evaluate students for medical conditions precluding low atmospheric training			
	(3) Supervise operation of a hypobaric (altitude) chamber			
	e. Mishap Investigation/Safety Program	PARTIES TO THE		
	 Consultation to mishap boards to assess crash kinematics, crash survivability, and human factors 			
	(2) Review local mishap and disaster response plans			
	(3) Quality assurance of crash site medical operations			
	(4) Medical liaison with AFIP and USASC			
	(5) Participation in aviation unit safety programs			
	CATEGORY IV PRIVILEGES			
	a. Occupational Medicine			
	 Identify occupational and environmental hazards, illnesses and injuries in defined populations; assess and respond to identified risks 			
	(2) Assess individual risk for occupational/environmental disorders using an occupational and environmental history			
	(3) Assist with occupational health promotion and disease/injury prevention programs			
	(4) Consultation for hazardous materials handling			
	b. Preventive Medicine			
	(1) Provide oversight for travel medical services			
	(2) Consultation for medical planning for deploying personnel			

CODE	CATEGORY IV PRIVILEGES (Continued)	ACCEPTABLE	UN- ACCEPTABLE	NOT APPLICABLE
	(3) Design and/or conduct an outbreak and/or cluster investigation			
	(4) Identify ethical, social and cultural issues relating to policies, risks, research and interventions in public and preventive medicine contexts.			
	(5) Develop, implement and refine screening programs for groups to identify risks for disease or injury and to promote wellness			
	(6) Implement community-based interventions to modify or eliminate identified risks for disease or injury and to promote wellness			
	(7) Design and implement clinical preventive services for individuals			
	SECTION II - COMMENTS (Explain any rating that is "Unacceptable".	,		
NAME AND T	TLE OF EVALUATOR SIGNATURE		DATE	YYYYMMDD)